

## FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA(1) Bonnie Lawson # 28875-016 :  
(Name of Plaintiff) (Inmate Number) :United States Penitentiary-Lewisburg :  
(Address) :(2) \_\_\_\_\_ :  
(Name of Plaintiff) (Inmate Number) :\_\_\_\_\_  
(Address) :(Each named party must be numbered,  
and all names must be printed or typed)? :  
vs. # 11844-016 :(1) Darryl Carter; prisoner :  
(Name of Defendant) :(2) Mr. Mac; Counselor :  
(Name of Defendant) :(3) Lieutenant; Mr. Beachel :  
(Names of Defendants) :(Each named party must be numbered,  
and all names must be printed or typed)3:16-cv-2088  
(Case Number)

## CIVIL COMPLAINT

FILED  
SCRANTON

OCT 17 2016

Per Amo  
DEPUTY CLERK

TO BE FILED UNDER: \_\_\_\_\_ 42 U.S.C. § 1983 - STATE OFFICIALS

\_\_\_\_\_ 28 U.S.C. § 1331 - FEDERAL OFFICIALS

## I. PREVIOUS LAWSUITS

(2 cases)

- A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

1) Middle District of Florida 2:15-cv-00642-PRH  
dismissed 2016 Judge-Phillip R. Lammers  
2) Eastern District of California 1:15-cv-00576-EPG  
dismissed 2016 Judge-Erica P. Grayson

**II. EXHAUSTION OF ADMINISTRATIVE REMEDIES**

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution? ☒ Yes ☐ No
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims? ☐ Yes ☒ No
- C. If your answer to "B" is Yes:

1. What steps did you take? \_\_\_\_\_

2. What was the result? \_\_\_\_\_

- D. If your answer to "B" is No, explain why not: my Florida case was dismissed because I thought it had to be done only once in custody

**III. DEFENDANTS**

- (1) Name of first defendant: Narryl Carter: prisoner  
 Employed as \_\_\_\_\_ at Lewisburg - U.S.P.  
 Mailing address: 2400 Robert F. Miller Drive
- (2) Name of second defendant: Mr. Marr  
 Employed as Counselor at Lewisburg - U.S.P.  
 Mailing address: 2400 Robert F. Miller Drive
- (3) Name of third defendant: Mr. Beachel  
 Employed as Lieutenant at Lewisburg - U.S.P.  
 Mailing address: 2400 Robert F. Miller Drive

(List any additional defendants, their employment, and addresses on extra sheets if necessary)

**IV. STATEMENT OF CLAIM**

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets if necessary.)

1. On July 27, 2016 ... cell #109 in D-Block, prisoner: Carter cut me on the back-side of my ~~left~~ left-hand with an object that I thought was a razor after an early-morning argument.

2. Approximately one month earlier, after officer: Hackenberg came up to cell #106 & ordered me to pack my things to move-in with prisoner: Carter. I refused and told him that we weren't going to get along. Moments later, Mr. Marr said, "we run this, we tell you what to do." I packed-up and move to cell #108 with Carter.

3. I wrote a written document to the lieutenant concerning a possible weapon of some kind in Carter's possession. And asked to have us pulled-out and the cell searched. It never was, not until the day of our incident.

#### V. RELIEF

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. \$15,000.00 in monetary damages awarded  
~~and~~  
 Darryl Carter take charged with use of a weapon
2. ~~And any other actions the court deems appropriate~~  
~~to prosecution~~  
 Darryl Carter take charged with use of a weapon  
 (is this a legal argument?)
3. Also I'd like to be placed on single-cell status, only for my remaining stay at Lewisburg's prison. Therefore, I could complete this program without my in-cell

altercations with my cell-mates. Most having mental-health problems.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 11<sup>th</sup> day of October, 20 16.

Bonnie J. Larson  
(Signature of Plaintiff) #28875-016



*[Handwritten signature]*

Inmate Name: *[Handwritten signature]*  
Register Number: *20075-06*  
United States Penitentiary  
P.O. Box 1000  
Lewisburg, PA 17837

*No Fee  
Enclosed  
- J*

RECEIVED  
SCRANTON

OCT 17 2016

*[Handwritten signature]*  
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United States District Court  
Middle District of Pennsylvania  
235 North Washington Avenue  
PO Box 1148  
Scranton, Pennsylvania 18501

Legal Mail

Office of the Clerk

